

THE AMERICAN JOURNAL OF NURSING

VOL. VII

JUNE, 1907

NO. 9

EDITORIAL COMMENT



RECORD KEEPING

AMONG the many important things that have come to light as a result of state registration and inspection is the fact that too many training-schools have been negligent in regard to keeping a record of their pupils; a number of schools that we know about having not even the names of the women who have been given diplomas. These have been unable, when one of their graduates made application for registration, to offer any information as to the character of her work or conduct during her period of training, or to give the date of her graduation. When schools show such a lack of responsibility for their pupils, how can the graduates be expected to come forth with any fitting sense of obligation to their profession or to the public?

Members of boards of nurse examiners have, in a number of cases, been greatly hampered by this lack of definite information which the training-schools should have been able to furnish. Another trouble arises from the fact that where records *are* conscientiously kept, too much attention is centered upon the moving of a nurse from one ward to another and not enough is given to the character of her work. The "remarks" of a pupil's record are as important as those of a patient's, and both are too much neglected. The record of a pupil in training should be a fund of such information as will be required later by the secretary of a directory for nurses when it is necessary that she should know the varying qualifications of the nurses on her list, and their suitability for various kinds of work.

In order to supply these demands, the school records should show: First, what sort of practical training the nurse has received. in how

many departments of the hospital she has worked, the length of her stay in each, her positions of responsibility as night nurse, surgical nurse, or head nurse; second, what her theoretical training has been, what classes she has attended, what lectures she has heard and what her marks have been for each; third, the record should show, not in a few words at the end, but all the way along and in detail, the character of her work in each service, whether good, indifferent, or bad, what her bearing is to her patients, her teachers, her fellow-workers, where she shows special adaptability and where she seems lacking, where a reprimand has been given and its cause; fourth, the record should keep an account of absences from duty and time to be made up.

It is evident that there should be a general reform in record keeping and there is no better time than the present, when the subject is before us, to begin a more uniform system which will not only be an aid in looking back for facts in a pupil's career, but which will give the superintendent of a school a clearer view of her own nurses while they are with her, and which may even afford the nurses themselves a juster superintendent of a school a clearer view of her own nurses while they should be able to view the field and assign work which is due, or fill out some deficiency, better than if she trusts to her memory. When a school changes superintendents, what a help it is all round if the new head can find waiting for her a full and clear account of the training up to date of the nurses committed to her care.

Last year, an outline of a form for record keeping was made out by one of our staff, after a comparison of many records of the representative schools. This is now published in the *JOURNAL*, not as a model record, but as an inviting peg upon which comments and criticisms may be hung, in the hope that after a full discussion by those interested, an amended form may be evolved good enough to warrant its being published by the *JOURNAL*, either in book form, or on cards for a file, where such a form is preferred.

THE SUPERINTENDENTS' MEETING

As it was not our privilege to attend the superintendents' meeting this year, we are not able to give a detailed report of the proceedings, but from all accounts received it was largely attended and was most interesting, both professionally and socially. As the proceedings are to be published in the July number of the *JOURNAL* we are not holding back these pages for the secretary's report.

THE ASSOCIATED ALUMNÆ

THE tenth annual convention stands out clearly before all preceding meetings for the definite conclusions reached on important subjects. The growth in confidence, harmony, and poise of the members was more clearly discernible in this meeting than ever before. Not only did the members discuss important subjects but they were ready to act upon them without hesitation. It is impossible in the short time and space at our disposal to touch upon all the subjects that were brought before the convention but we mention those that seem most vital at this time.

The subject of the endowment of the chair at Teachers' College was most ably championed by Miss Nevins of the Garfield Hospital, secretary of the American Society of Superintendents of Training-schools. A most enthusiastic discussion resulted in pledges from the delegates of contributions amounting to more than four thousand dollars which will undoubtedly be increased after the delegates have laid the matter before their local associations. This, added to the amount pledged at the superintendents' meeting at Philadelphia the previous week, brings the total from these two meetings to between six and seven thousand dollars. While the money is, of course, very important, the broader interest and growing enthusiasm of the members gives assurance of the ultimate success of the endowment of the chair at Columbia. The fact that Miss Nutting is to have, in a general way, supervision of this course after the autumn has added very greatly to the general interest shown by the members.

THE ACTION OF THE NATIONAL SOCIETIES ON THE
THREE YEARS' COURSE

At the meeting of the American Society of Superintendents of Training-schools, which held its annual meeting in Philadelphia on May 8, 9, and 10, a resolution was passed in approval of the three years' course of training for nurses and in condemnation of the return to the two years' course. At the meeting of the Associated Alumnae at Richmond, May 14, 15, and 16, a resolution which was to have been presented was overlooked in the pressure of business of the last session. This oversight was corrected before the members separated, and at the request of the president, Miss Damer, the members were called to the deck of the steamer as it approached Jamestown Island, and a resolution, presented by Miss McMillan of Chicago, and seconded by Miss Alline of New York, endorsing the three years' course with shorter hours, and disapproving

a return to the two years' course, was unanimously carried. This action led to much controversy among the members in groups in regard to the long hours both in hospital and private duty and some of the suggestions we overheard lead us to believe that the next great concerted action for nurses of the whole country must be along the lines of shorter hours for all hospitals conducting training-schools. If women in factories and sweat-shops are worthy to be protected by law from the abuse of overwork, certainly the nurses in our great eleemosynary institutions are entitled to the same consideration. We have waited in vain for the universal adoption of the eight hour system by the boards of managers who control these institutions, and we believe that public sentiment must be brought to bear upon this vital question.

TO ASK FOR REPRESENTATION

MISS DAMER, the president, in her annual address, advocated representation from alumnae associations on the boards of managers of training-schools. Acting upon this suggestion, a motion was introduced and unanimously carried that the affiliated societies should, either by conference or by letter, as might seem in each case more advisable, ask for representation on the boards of their schools. In this, the nurses are only asking for what should have been offered to them, as there are very few educational institutions which exclude entirely graduates of the institution from the management. If there is to be harmony and coöperation in the future between the nurses and the training-schools, a voice in the management of the schools becomes essential. We hope every alumnae will act promptly at its first fall meeting, bearing in mind that such action must be in the form of a most courteous request and not a demand, and although success may not come with the first effort, we believe that it will in time if the matter is properly managed. To some boards this request will come with something of a shock and may seem almost an impertinence.

FALSIFYING OF RECORDS

ONE of the most animated and interesting discussions which took place and in which the private duty nurses were especially interested, was that brought out by a question from the question box: "Who owns the chart,—the doctor, the nurse, or the family?" It was shown that in a number of legal contests the decision of the court has given the chart to the family, and instances were cited where, in a murder case and in

a division of property, the verdict was rendered by the evidence contained in a nurse's record.

The discussion brought to light the fact that on account of the curiosity of the family during the progress of the patient's illness, false records are frequently made, the interpretation of which are understood only by the doctor and the nurse. If these charts are recognized legally as being of such importance, it becomes doubly necessary that they should be accurate. It is degrading to both physician and nurse to have such records made, and it would be humiliating to have them produced in court and not to be able to swear to their accuracy. Further, it is lowering to the moral status of the woman to lend herself to such deception. It is within the province of the physician to forbid the family to read the record while the case is in progress, and we believe that if both he and the nurse would exercise proper tact and judgment stooping to such deception could be avoided.

We believe the occasions are rare where either a physician or a nurse is justified in deliberate misrepresentation of the truth in dealing with their patients or with the members of their families. We are still of the opinion that professionally the chart belongs to the physician and that on the termination of a case he should decide what should be done with it. The growing custom of a nurse's keeping her records in a bound book and carrying them from one case to another seems to us most undesirable, especially if these record books are accessible to any members of a family, nor do we think it ethical for physicians to scrutinize the history sheets of their brother practitioners as we know they do upon occasions.

Another question which arose during the discussion was that of the disposal of the record when either the nurse or the physician or both are discharged from a case. One speaker cited an instance of being called to a very sick patient where both she and the doctor worked in the dark at first, as the record had been carried off by the former attendants. This might be a menace to life, and it would seem the only justification of the decision of a court that the chart belongs to the family. Common professional courtesy from one physician and nurse to another would demand that when leaving a patient before the case has terminated the chart should be left.

ALMS HOUSE NURSING

Mrs. Caroline Bartlett Crane of Michigan, who is devoting herself to the cause of obtaining better care for the aged and sick poor in almshouses, made a stirring appeal to the members to coöperate with the women's clubs in all of the states for reform along these lines. The

Michigan nurses are already coöperating with the Michigan federation of women's clubs and a full report of the progress which has been made was read by Mrs. Lupinski and will be noted with interest when the proceedings are published in our August number.

All of the subjects which were presented at this meeting were of so important a character that they should be made the basis of the work in state and local associations during the coming year.

THE SOCIAL SIDE OF THE CONVENTION

THE entertainments at Richmond were such as could not have been given elsewhere and were of a most enjoyable character. One evening was devoted to a concert given the association by Mr. Polk Miller, who has made a special study of negro melody as he remembers it from his childhood. His talk on this subject, interspersed with quaint anecdotes, was most interesting and unusual, and was illustrated with the music given by his quartette of negroes.

The officials of the society were entertained at the home of Miss Mary Johnston, the authoress, and of her sister, Miss Eloise Johnston, a Richmond nurse, where they had the opportunity of meeting some of the prominent men and women of the city.

The delegates were enabled to visit the old Richmond churches, so full of historic interest, to see work in a tobacco factory and to listen to the singing of the workers, while the crowning event was, of course, the trip down the James River. The forest covered the banks at each side, with an occasional break where a noted plantation appeared, but for miles at a time the woods, filled with azalias, and with cardinals flitting through the tree tops, seemed uninhabited, and we might have been the original explorers. A stop was made at Jamestown Island for an hour, where the mounds of defense thrown up by the early settlers, the old church tower, the original foundation of the church, the absence of present occupation, and the prevailing peace and quiet gave one a deep sense of having gone back to the beginning of things. It was a rare treat. Many of the nurses availed themselves of the opportunity, so thoughtfully arranged for them, of spending a day at the exposition or at some of the interesting places near by. The unfailing courtesy and kindness of the Virginia nurses will remain long in our hearts. Some one was overheard wishing that we might take their gentle southern voices home with us. To entertain so large an assembly was a great undertaking for so small a group of women, and their guests hope that the inspiration left behind may equal that which was carried away.

A FAIR STATEMENT

IN the April number of *The Interstate Medical Journal* is found an editorial on the "Question of a State Law for the Registration of Nurses" in which the writer treats the subject so broadly and fairly that we quote it in full for the encouragement of our readers who have met with defeat in registration through medical opposition. The little Pennsylvania pamphlet referred to in this editorial is, in our opinion, a disgrace to the profession of medicine when we consider the standing of the men whose names are attached to it. It not only misrepresents the truth in regard to state registration and the nursing situation but is undignified and unprofessional in tone and language. It is indeed remarkable that Pennsylvanians should have been obliged to so play to the gallery in order to defeat the efforts of the nurses of the state in their struggle to secure a legal status through state registration. The editorial reads as follows:

"In a most interesting little pamphlet, we note that there is much agitation in Pennsylvania over an act now pending in the legislature which will, if passed, require the registration of nurses. This pamphlet, which is our source of information, has appeared under the auspices of the Interstate Committee on Nursing, which committee has for its object the 'regulation and advancement of nursing, the spreading of correct information regarding the duties and limitations of the nurse, and the proper relations of the nurse to the medical profession and to the community.'

It seems that the title of 'trained nurse' is one that admits of great latitude, so much so, that the class of individuals calling themselves consists of an onslaught upon the trained nurse, and makes a violent appeal against the passage of the law for the registration of nurses, on the ground that it is not only unnecessary but positively harmful.

It seems that the title "trained nurse" is one that admits of great latitude, so much so that the class of individuals calling themselves trained nurses may be said to be made up of women ranging from the intelligent, well-educated woman, with much hospital experience, down to the ignorant, self-complacent individual, who has had years of experience but no definite training. Some of our professional brethren in Pennsylvania seem to regard the trained nurse as an entity, losing sight of this range of personality and acquirements, which in itself presents the chief consideration in the passage of such a law. We do not claim that all intelligent, well-educated and well-trained women are good women, but we are aware of the fact, on the other hand, that all ignorant women are not good women. It is a fallacy to suppose that, because

certain educated nurses are overbearing and require too much waiting upon, these faults result from their training. It is equally fallacious to reason that, because a woman is ignorant and unofficious she is a good nurse and will obey the physicians' orders when left with the patient.

Undoubtedly, since the systematized training of women to become nurses began, the care of the sick and injured has been improved by myriads of details, of which the masculine mind is as a rule incapable, and of which the untrained female mind does not see the need. The great blunders and mistakes that arise in the treatment of the sick and injured, usually have their source in carelessness on the physician's part or ignorance on the part of the nurse, or a combination of these faults. For argument's sake, let it be assumed that the ideals of the properly trained nurse are high ideals; also that the ideals of the ignorant so-called trained nurse may be high, but that the chance is that she has nothing to fall back upon but her womanly interest in nursing, which is one of the most fruitful sources of serious mistakes or of insubordination on her part. Assuming as a matter of course the truth in the idea that education and training are our chief resources against vicious carelessness and ignorance, it seems clear that the woman who has honestly gone into nursing from the outset with the intention of fitting herself for this calling and attaining as much knowledge and proficiency as possible, has a good case when she asks of the state that she be protected from those who masquerade as nurses and bring the work of the nurse so often into disrepute by their lack of cultivation as women, and their absolute ignorance of the objects of medicine.

Culture, refinement, education and definite professional training are the qualities that should be demanded of a professional nurse if she is to have a fixed place in the community. The first step towards this end is the registration by the state of those who are capable and the exclusion of those who are unfit. So energetic a demand as that contained in the pamphlet issued against the passage of the Act for Registration of Nurses in Pennsylvania seems far beneath the dignity of any fair-minded person, and much further than this, beneath the dignity of a physician whose aim should be toward the betterment of medical conditions in the community. If any physician or surgeon has repeatedly had the sad experience with nurses which are set forth in the pamphlet; if in his contact with professional nurses, especially where they have been of good hospital training, he has again and again found them overbearing and critical, let him take an honest, unprejudiced look at himself and his methods, and compare them with the standard set by any modern hospital for its medical staff. Perhaps he will discover something.

The trained professional nurse is an absolute necessity to the modern physician, and incidentally to the modern patient. The better her training and the better her general education, the surer will be the chance of her being a good woman and a good nurse. As a class trained nurses should set up requirements and be very careful whom they admit into their sisterhood, and the state should see to it that they are protected.

The statement of Mrs. Fenwick in *The Outlook*, January 6, 1906, has acted as a violent stimulus to the writers and signers of the Pennsylvania pamphlet. In this our brethren make a serious mistake, as they seem to consider it a representative statement whereas in all probability it is only the statement of a much-biased and enthusiastic woman.

Concerning insubordination on the part of nurses, any clear sighted physician need only ask himself once (if he greatly values his medicines) to be convinced as to which sort of nurse, in all human probability, would be the more likely to cast his concoctions out of the window. Would it be the educated, refined woman, who understands rational therapeutics, or would it be the old Betsy Prig or Sairy Gamp, who has long administered catnip tea and done obstetrics on her own responsibility?

The regulation and control of nurses by state law is a great step in the advancement of medicine. For a time the passage of such a law might be followed by unpleasant conditions, due to individual misconception, but the end-result would certainly mean a purification of the nursing ranks similar to that produced on medicine in general by the legal demand for the registration of medical practitioners."

AFFILIATION

To those interested in the results which follow state registration it is gratifying to note the steady progress made along the lines of affiliation of training-schools, especially of those which would give a one-sided and incomplete training alone, but which offer admirable service in special lines. Two schools which afford an example of this are the Isolation Hospital, Toronto, and the Lying-in, Chicago. The Riverdale Isolation Hospital has a training-school of its own, but as it is affiliated with St. Mary's Hospital of Detroit, its pupils have a well rounded training. The Riverdale Hospital is beautifully situated in large grounds of its own, on the bank of a river. It is devoted to the care of patients having contagious diseases, and it has under its care a small-pox hospital, situated a short distance away, where its pupils may have the opportunity of studying this disease. The nurses are vaccinated before taking this service, no matter how recently this had been done, and no nurse or

attendant has ever contracted the disease. During the last twelve years there have been only three deaths among the small-pox patients. In the Riverdale Hospital, proper, there are one hundred and seventy-five beds, and it affords both practical and theoretical work.

In the Lying-in Hospital, Chicago, there is affiliation with several different schools and also a post-graduate course. The technique is similar to that followed in the dispensary work, described in Dr. DeLee's article in the May JOURNAL. The special advantages of training in such a place lie in the fact that the students are receiving a full course of instruction in a place especially equipped for the work, and from teachers who are leaders in this line of work.

The recent opening of Bellevue, The Woman's Hospital, New York, and, as announced in this JOURNAL, of the S. R. Smith Infirmary, Brooklyn, to post-graduate students or for affiliation illustrate further developments along these lines.

PROGRESS OF STATE REGISTRATION

VERY much to the disappointment of those who have been working hard during the past year in preparing an amendment to the bill already passed in the state of New Jersey, that would more nearly conform to the requirements now in force in other states, an opposition movement was started by nurses at the eleventh hour, where no previous interest had been shown in the matter, and when it was practically too late to reopen discussion, as the bill was ready for introduction. On being presented in the house, interest had been secured which placed it in the committee of miscellaneous business from which it never emerged.

It is realized that the measure was undoubtedly due to the unsettled spirit that prevails over the New York hospitals at present, producing the uneasiness against the enforcement of the three years' course. It is earnestly hoped that the coming year will bring a decision in the furtherance of this most essential point, that there will be no such retrograde movement either in New York or New Jersey as a return to the short term course, and that the delay in the New Jersey registration will be but a temporary setback which can be overcome by a clearer insight into the future welfare of the profession in this state.

The Illinois bill has passed both houses of the legislature, has been signed by the governor, and has become a law. We regret that we cannot give a copy of the bill before September.

AN OPPORTUNITY FOR WORK ABROAD

THE Domestic and Foreign Missionary Society of the Protestant Episcopal Church is in urgent need of two trained nurses for work in China: one for St. James' Hospital, Anking, and one for St. Peter's Hospital, Wuchang. The qualifications are a good degree of professional skill, robust health, ability to acquire the language, to work well with other members of the staff and to direct Chinese assistants. Volunteers should be preferably not over thirty and must be members either of the Episcopal Church in the United States, England, or Canada. Both hospitals are well equipped and have a large field for useful service. Full particulars can be obtained from Mr. John W. Wood, 281 Fourth Avenue, New York City.

AN OPPORTUNITY FOR WORK AT HOME

THE New York Association for Improving the Condition of the Poor calls for trained nurses who will volunteer for its summer work. Some are needed on the staff at Sea Breeze Hospital, for children suffering from tuberculosis of the bones and glands; some for district work in tenement homes; and others at Junior Sea Breeze where, in the heart of the city, sick babies' lives are saved and their mothers are taught how to care for them. The compensation will not be large but the opportunity offers rich reward in service rendered and in experience gained under progressive and inspiring leadership. Applications should be made at once and may be addressed to Mr. William H. Allen, General Agent, 105 East Twenty-second Street, New York City. This organization, with its sixty-three years' experience, is one of the most progressive and strongest social forces in New York. Last year it relieved over four thousand families in their homes besides giving fresh air outings to twenty-three thousand women and children.

A MESSAGE FROM THE CANAL ZONE

WHEN too late to publish with Miss Freeland's paper on Nursing in the Canal Zone, we received a very interesting set of photographs from Miss Louise A. Furber, one of the nurses of the Colon Hospital, and a graduate of the New England Hospital of Boston. We shall reproduce the photographs in a later issue as they give such a clear idea of the Colon Hospital that they hardly require a reading description. We do not make a practise of publishing letters of appreciation of the JOURNAL

which are constantly coming into our hands, but we were especially gratified with the note which accompanied the photographs, which reads as follows: "I wish to add a word of appreciation for our JOURNAL; it is doing so much to keep us in touch with nursing affairs, and in a way makes up to us for the loss of state and alumnae meetings, which is unavoidable to those of us who leave home."

RED CROSS WORK

ONE of the special features of the JOURNAL, beginning with the fall issues, will be a department in Red Cross work, which will be directly under the supervision of Miss DeWitt at the Rochester office. First we propose to give a brief outline of the work of the Red Cross as it is being reorganized, with special reference to the nursing side of the work, which will be followed, month by month, by reports on the enrollment of nurses from the different states, taking up in turn the same subject in other countries and keeping before our readers the progress in the development of Red Cross work the world over. For this department we want contributions from nurses everywhere who are engaged in this work and who are interested in the enrollment of a great body of Red Cross nurses.

